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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of

TAI et al.

Application Number: 10/772,431

Filed: February 6, 2004

For: IMAGE DISPLAY DEVICE

Attorney Docket No. NITT.0188

Art Unit 2871

Examiner
Vu, Phu

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	4	8	(Over 20)	x \$50	0
Independent Claims	1	3	(Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x 1/2	
				TOTAL	0

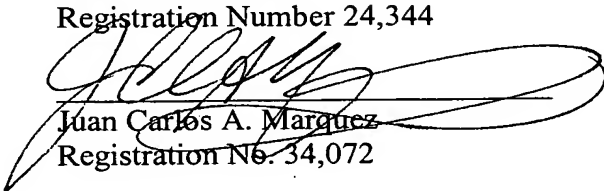
In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Response/Amendment
(with Claim Amendments) | <input type="checkbox"/> Petition for Extension of Time |
| <input type="checkbox"/> Substitute Spec. & marked-up copy | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Letter to Draftsperson |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Assignment |
| | <input type="checkbox"/> RCE |

- ☐ Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ _____ to cover the fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

Stanley P. Fisher
Registration Number 24,344


Juan Carlos A. Marquez
Registration No. 34,072

REED SMITH LLP
3110 Fairview Park Drive
Suite 1400
Falls Church, Virginia 22042
(703) 641-4200
January 25, 2007



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RESPONSE AND AMENDMENT UNDER 37 C.F.R. § 1.111

Sir:

This is in response to the Office Action mailed on November 3, 2006, the period of response to which is set to expire on February 3, 2007. Please amend the above-referenced application as follows: